

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	3	1	5
2	2	3	18
3	1	03	03
4	1	1	
5	1	1	
6	1	1	
7	1	1	
8	1	1	
9	1	1	
10	1	1	
11	1	1	
12	1	✓	✓
13	1	N	
14	1	N	
15	1	✓	
16	1	1	
17	1	1	
18	1	✓	
19	1	✓	
20	1	✓	
21	1	1	
22	1	1	
23	1	✓	
24	1	✓	
25	1	✓	
26	1	1	
27	1	1	
28	1	1	
29	1	1	
30	1	1	
31	1	1	
32	1	✓	
33	1	✓	
34	1	✓	
35	1	✓	
36	1	✓	✓
37	1	N	
38	1	✓	✓
39	1	1	
40	1	1	
41	1	1	
42	1	1	
43	1	1	
44	1	1	
45	1	1	
46	1	1	
47	1	1	
48	1	✓	
49	1	1	
50	1	1	

Claim	Final	Original	Date
51	1	1	
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Claim	Final	Original	Date
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149	1	1	
150	1	1	

If more than 150 claims or 10 actions  
stapl additional sheet her

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